Name: _____

Mailing Address: _____

City, State, Zip: _____

Daytime Phone / Alternate Phone: ( ) - ( ) -

Maricopa County Justice Courts, Arizona

Please select court from the drop down list --------

_____)
_____)
_____)
_____)
_____)
_____)
Appellant Name / Address / Email / Phone)
vs.)
_____)
_____)
_____)
_____)
_____)
Appellee Name / Address / Email / Phone)

CASE NUMBER: _____

LC CASE # _____

☐ **APPELLANT MEMORANDUM**

☐ **APPELLEE RESPONSE MEMORANDUM**

☐ **ORAL ARGUMENT REQUESTED**

STATEMENT OF THE CASE:

Date Stamp

STATEMENT OF THE FACTS:

STATEMENT OF ISSUES PRESENTED FOR APPEAL:

REASONS WHY THE JUSTICE COURT RULED INCORRECTLY (INCLUDE ANY STATUTES OR AUTHORITY):

CONCLUSION:

CONCLUSION:

Date: _____ _____
Signature

I CERTIFY that I delivered / mailed a copy of this ☐ APPELLANT MEMORANDUM ☐ APPELLEE RESPONSE MEMORANDUM to:

☐ Plaintiff at the above address
☐ Plaintiff's attorney at:

_____
Attorney for Plaintiff(s) Name / Address / Email / Phone

☐ Defendant at the above address
☐ Defendant's attorney at:

_____
Attorney for Defendant(s) Name / Address / Email / Phone

Date: _____ By: _____
Clerk